O'Neill Proposal L.A. County

Agency/Program Background

A network of self-managed, self-supporting houses for low-income men and women recovering from alcohol and other drugs would be opened in Los Angeles County. The houses will be modeled on Oxford Houses, which have operated successfully in the Washington, D.C. area since 1975 and are located in some 27 states, mostly in the East.

The director of the program in Los Angeles will be John O'Neill. He was co-founder of Oxford House, Inc. in the Washington, D.C. area in 1975; first president in its formative years, 1975-80, when it grew from one to 10 houses; and initiated the Oxford House expansion in 1987 that led to its rapid growth.

O'Neill was directly involved in locating, leasing and opening almost all of the first 30 Oxford Houses, including the first opened outside the Washington area. He has made presentations and acted as a consultant on self-managed, sober houses for the National Institute on Alcohol Abuse and Alcoholism and to states and counties all over the United States, including Los Angeles County, Alameda County, Monterey County and the University of California at San Diego.

Problem Statement

People recovering from addiction to alcohol and other drugs can help themselves recover by providing for themselves a sober environment in which recovery is the goal. Alcoholics Anonymous and Narcotics Anonymous demonstrated that years ago. The Oxford House model of recovery houses helps people create a home environment where 12-Step principles and fellowship can be utilized around the clock until individuals feel comfortable enough in their sobriety to move. The choice to move or stay is the individual's.

The principles of operation in an Oxford House-type house are

simple. Residents are required to pay their share of the rent and expenses and stay free of alcohol and drugs. It's as simple as that. All decisions about how the house is run are made by residents. There are no counselors or paid administrators. The process of recovery occurs in the interactions between the house residents as they attend AA and NA meetings together and help one another stay sober.

Oxford House began in Silver Spring, Md. in 1975 when Montgomery County determined it couldn't afford to keep a halfway house open. The halfway house residents were fearful of losing their short-lived sobriety if they moved into solitary, substandard housing. When they found they could keep the house by assuming the lease, they accepted the challenge.

They decided the operation would be simple. Expenses would be divided among residents, those who drank or used drugs would be expelled and all would abide by democratic procedures.

The house worked better when it was self-run. The 13 men took more pride in the property and its management. After six months they had accumulated a surplus of $1,200 and chose to give the money away to help start another house like the first. Some men from the first house moved to help start the second. It, too, was soon filled and the telephones at both were ringing with queries from would-be residents for whom where was no room. The men repeated the expansion process over the next two years until there were 10 houses, eight for men and two for women.

Expansion slowed as the founders moved on to other interests, but the houses themselves continued to operate successfully for years with no outside influences. Today, after a period of expansion that began in 1987, there are more than 70 Oxford Houses in the Washington area and they are a well-known, firmly established component of the recovery community. Many area alcohol and drug rehabilitation facilities, both public and private, refer to Oxford Houses their clients who lack a stable living situation to which to return.

In early 1988 when the Congress was looking for ways to deal with the nation's alcohol and drug problems in a time of budget austerity, they discovered the Oxford Houses which had been operating in their backyard for 13 years. Congress decided that Oxford House should serve as a national model. The upshot was Section 1916A of the Anti-Drug Abuse Act of 1988 which requires each state to establish a revolving fund for start up loans for start-up of facilities just like Oxford Houses -- houses that utilize no paid staff, that operate democratically with current residents voting on new residents, that are drug and alcohol free and are self-supporting.

Since the Anti-Drug Abuse Act of 1988, Oxford House has grown to more than 200 houses in more than half the states. In addition, dozens of similar houses have opened.

Federal officials have in recent years placed great emphasis on sober, affordable, transitional housing as being an important recovery tool, especially for homeless people and those who are near-homeless.

Researchers typically find, as did Sue Korenbaum and Gina Burney, that: "There is a definite need for low-cost alcohol-free living quarters for recovering people without homes, and it appears that alcohol-free living centers may be one way to meet this need. The growth in the number of facilities established by parent agencies across the country gives some treatment professionals hope that the alcohol-free living center will win acceptance as a recovery tool and that such centers will help take the revolving door off its hinges.[1]"

Federal experts on alcohol and drug recovery see a great potential for Oxford House-type houses. "It offers a simple, cost-effective way to provide an opportunity for recovering individuals to live in a supportive environment that is free of

---

[1]Sue Korenbaum, Gina Burney: "Alcohol Health & Research World"; National Institute on Alcohol Abuse and Alcoholism; Spring 1987.

substance abuse," wrote Beny J. Primm M.D., associate administrator in the Office for Treatment Improvement, an arm of the federal Alcohol, Drug Abuse and Mental Health Administration.

Added Dr. Primm: "Replication of the Oxford House concept throughout the United States can be achieved on a mass basis if community leaders and the recovery community work together toward that goal.[2]"

Dr. Primm is correct that self-managed, self-supporting, sober houses can be created on a large-scale basis, as has been demonstrated in the Washington, D.C. area. But there is a missing link. There simply is no precedent for self-managed, self-supporting houses to be created by traditional organizations or halfway houses run by government and private not-for-profit institutions.

Almost invariably when these institutions start recovery homes they include paid staff, rules imposed by the staff and control of admissions and dismissals. Imposition of this type of control is inconsistent with an Oxford House-type house and prevents them from becoming truly self-managed or self-supporting.

There are more than 100 recovery homes in Los Angeles County run by individuals and private organizations. No more than two of them are self-managed.

So even in Los Angeles County where Social Model systems (systems in which recovering people play an important role in creating their own environment for recovery) are prominent and where many care providers have been familiarized with the Oxford House model in presentations, few if any houses of this type have emerged.

The obstacles are two-fold. First, organizations have no real incentives to open houses of this type. They do not benefit from funding of the houses in future years since no funding is

---

[2]Office of Treatment Improvement: "Self-Run, Self-Supported Houses for More Effective Recovery from Alcohol and Drug Addiction." DHHS Publication No. (ADM) 90-1687. Printed 1990.

required. Instead they would have to divert staff from demanding ongoing projects that are already funded to start self-managed houses. Second, self-managed houses stand a much greater chance of initial success and of expanding if there is technical assistance supplied by people who have started self-managed houses before, then relinquished all management to the residents.

To quickly establish a network of self-managed, self-supporting houses in Los Angeles County will require technical assistance. Oxford House was able to quickly open houses in Washington because of the experience of its senior people in locating and leasing suitable properties, motivating residents to make the houses work, and its proven system of operations. The system includes an operations manual for residents that informs them how successful houses work -- how people are accepted for residency and evicted for failure to pay rent or for substance use, the election of officers and their duties and many other tips on running successful houses. The operations system also includes a method whereby houses meet to share experiences and strengths. This serves as a method of quality control to assure that no house allows drinking or drug use or fails to be financially responsible.

Objectives

The objectives are:

*To replicate in Los Angeles County a network of self-managed, self-supporting, alcohol and drug-free houses similar to those operated in Washington since 1975.

*To locate, lease and open a minimum of 10 self-managed, self supporting alcohol and drug-free houses in Los Angeles County over the course of one year.

*To establish contact with all the publicly and privately-funded alcohol recovery facilities in the area so they are aware of the houses and are a source of residents.

*Indoctrinate new residents on how self-managed, self-supporting houses work so residents democratically elect officer, know procedures for admission and ejection of those who use alcohol or other drugs and establish a sound system of payment of bills.

*Have at least one person who has years of experience in locating and opening houses located in Los Angeles for the entire year to get houses started and provide nurturing to those houses in the early months when the most problems need solving.

*When necessary, create public awareness of self-run houses and of alcoholics and addicts as good neighbors.

*At the end of the year leave in place a viable network of interconnected houses that are highly replicable and residents in them who are motivated to expand the concept and are themselves authorized to issue charters to new houses.

*Write a report about our experiences in opening houses in Los Angeles so the county will know what happened and so others, if they wish, may use it as a model to quickly open a large number of self-managed houses in an urban area.

Methods

John O'Neill would

*Establish residence in Los Angeles.

*Make sure there is a usable operations manual for use by house residents.

*See that the organization is incorporated and able to do business in Los Angeles and open a bank account in the corporation's name.

*Contact alcohol rehabilitation units and recovery homes about potential residents, arrange for furniture, find and lease the first houses, interview and indoctrinate the first residents on how the houses work.

*Thereafter the process would be a balance of opening new

houses while periodically visiting existing houses to ensure they are operated as they should be.

Houses will be located through traditional means: real estate agents, newspapers and contacts with people who might have property to lease.

As the operation grows it will become important to have a second person available to search for houses, make sure furniture and residents arrive at about the same time and to troubleshoot, perhaps even live in new houses for a couple of weeks.

There are several ways the staff of the Office of Alcohol Programs or people they know could be helpful:

*If the houses average nine residents, 90 beds and 90 dressers will be required during the year. Lack of beds and dressers has in the past bogged down rapid opening of houses. It would be a great help if the county could locate surplus beds and dressers and arrange to have them delivered to houses as needed.

*Contact real estate agents who want to help find houses, or recovering people who know the real estate market and want to be helpful, so there are houses in good neighborhoods to see quickly.

*Furnish access to care providers through mail or meetings so they know what is happening and will furnish a steady stream of residents.

*Back us up if we should get in a zoning dispute. although this seems unlikely since the Fair Housing Amendments Act of 1988 clearly gives recovering people to right to lease houses anywhere.

Implementation Plan

After a start-up period of several weeks, the houses will be opened at approximately one per month for 10 months. The final month will be spent making sure all is well in the houses, encouraging residents to continue expanding on their own and writing the final report.

Future Activities

After the one year period, it would greatly enhance the continued expansion of the self-managed, self-supported sober housing concept if one person could be hired to continue to answer queries, search for houses to lease in good neighborhoods and promote the concept in Los Angeles County and Southern California. This proposal, however, makes no provision for such a position.

Evaluation

Evaluation will be simple. All that needs to be determined is whether the houses are opened and operating as self-managed, self-supporting, alcohol and drug-free residences.

Budget

Labor

Program director's salary	$48,000
Assistant's salary	$25,000
Labor overhead (Social Security & health ins.)	$ 8,000
Total	$81,000

Travel/Telephone

Auto expenses, 30,000 miles @ .25 cents/mile	$ 7,500
Telephone	$ 1,200
Total	$ 8,700

New House Expenses

Initial rent, security deposit, miscellaneous per house $4,000	$40,000

General and Administrative Expenses

G&A expenses ($129,700 x 5%)	$ 6,485
TOTAL	$136,185